

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION | BA | 70385 | |
| O.I.P.E. CLASSIFIER | LL | 112 | 2/1/00 |
| FORMALITY REVIEW | EJH | 60135 | 3/9/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|------------------------|------------|---------|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral)... | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Final | Original | Date |
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| 14 | | NN | |
| 15 | ✓ | ✓✓✓ | |
| 16 | | ✓✓ | |
| 17 | | ✓✓ | |
| 18 | | ✓✓ | |
| 19 | | ✓✓ | |
| 20 | | ✓✓ | |
| 21 | ✓ | ✓✓✓ | |
| 22 | NNN | | |
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| 24 | | | |
| 25 | ✓ | NN | |
| 26 | | ✓✓ | |
| 27 | | ✓ | |
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| Claim | Date |
|-------------------|------|
| Final Original | |
| 51 | |
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If more than 150 claims or 10 actions
staple additional sheet here